



***City of Springfield, Missouri***  
***Special Event***  
***& Amplified Sound Permit***

Issued by the City of Springfield, Missouri,

**Froze Nose & Toes 5K & 1 Mile Fun Run**  
(Not Transferable)

For approved event scheduled for:

Event Date: Saturday, December 3, 2016

Event Time: 9:00 - 11:00 a.m.

Event Location: Near the Nature Center in SE Springfield

Estimated Attendance: 250

Signed: Shawn Spaine  
Special Event Permit Coordinator

Date: 5/10/16

*This is a permit only, and is not an endorsement of the scheduled event.*



# SPECIAL EVENT APPLICATION

All Special Event applications must be submitted to the Springfield Police Department a minimum of **30 days** before the desired event date. All parades or races shall be held on weekends or holidays, during daylight hours only. (Municipal Code: Section 78-384 and 78-387)

## Mail Completed Special Event applications to:

Special Events Coordinator, Springfield Police Department, 321 E. Chestnut Expressway, Springfield, MO 65802-3803

SPONSOR OF EVENT	
Name Of Organization: <i>The Summit Prep School</i>	
Contact Name: <i>Dulsey Stewart</i>	
Address: <i>2655 W Chesterfield Blvd</i>	
City, State, Zip: <i>Springfield MO 65807</i>	
Website Address: <i>thesummitprep.org</i>	
Email Address: <i>dulsey.stewart@gmail.com</i>	
Phone: <i>673-239-0908</i>	Other Contact Phone:

APPLICANT <i>SAME</i>	
Name Of Organization:	
Contact Name:	
Address:	
City, State, Zip:	
Website Address:	
Email Address:	
Phone:	Other Contact Phone:

EVENT INFORMATION			
Name Of Event: <i>Froze Nose 5K &amp; 1 mile fun Run</i>			
Date Of Event: <i>Dec 3, 2016</i>	Start Time: <i>9am</i>	End Time: <i>11am</i>	
Type Of Event: <input checked="" type="checkbox"/> Run/Walk <input type="checkbox"/> Parade <input type="checkbox"/> Other		Number Of Participants: <i>250</i> People <i>2</i> Vehicles _____ Other	
Additional Information:		Additional Information:	
<p><b>Municipal Codes:</b> I, the Applicant/Sponsor, hereby agree that the event shall be conducted in an orderly manner with due regard for the convenience of the general public and with as little interference as possible with vehicles and movement of traffic. All lawful orders from police officers assisting with the event shall be followed.</p> <p><b>Indemnity:</b> I, the Applicant/Sponsor, agree to defend, indemnify, and hold the City of Springfield, and it's employees, harmless from and against all claims, losses, and liabilities arising out of personal injuries, including death and damage to property which are caused by the Applicant/Sponsor or arise out of or are in any way connected with the event authorized by this permit.</p> <p><b>Insurance:</b> If the Special Event requires the use of a public street, alley, trail, or other thoroughfare maintained by the City of Springfield, the Applicant/Sponsor agrees to provide a policy of liability insurance in the amount of \$1,000,000 per occurrence, with a general aggregate of \$1,000,000, naming the City of Springfield as an additional named insured, with appropriate endorsements as required by the City of Springfield Risk Manager. If the Special Event does not require the use of any thoroughfare maintained by the City of Springfield, other than sidewalks, the City of Springfield Risk Manager may waive the liability insurance requirement.</p>			
ATTACHMENTS: <input checked="" type="checkbox"/> Insurance Certificate <input type="checkbox"/> Event Participant Liability Waiver <input type="checkbox"/> Other:			
Sponsor's Authorized Agent Signature: <i>Robert F. Hornung</i>	Date: <i>4-18-16</i>	Applicant Signature: <i>Dulsey Stewart</i>	Date: <i>4-18-16</i>

**Parade or Race Route**

Sketch the parade or race route below. Include all street names of parade/race route and names of all cross streets. Identify all traffic control devices (stop signs, yield signs, and traffic lights) and direction of traffic control. Use additional paper if needed.

*See attached*

**CITY OF SPRINGFIELD USE ONLY**

Date Application Received: 4/23/16  
Reviewed: Cpl. Chris Weist Date: 4/23/16 Permit Recommendation: ☒ Approve ☐ Deny  
(Special Events Coordinator)  
Comments: Running event near Nature Center. Residential streets will  
BE USED NO MAJOR INTERSECTIONS. Police will NOT  
BE Required  
Reviewed: Sgt. David McCarty Date: 5-3-16  
(Special Events Supervisor)  
Reviewed: James C. Stahl Date: 5-2-16  
(City of Springfield Risk Manager) Safety Coordinator  
Reviewed: A/Chief Phil D. Hall Date: 5-6-16 Permit: ☒ Approved ☐ Denied  
(Chief of Police)





## Special Event Permit Application

1. Event Name: Froze Nose & Toes 5k & 1 mile fun Run
2. Event Date(s): Dec 3, 2016  
Alternate date(s): \_\_\_\_\_
3. Name of Organization: The Summit Prep School  
Street Address: 2155 W Chesterfield Blvd  
City/State/Zip: Springfield Mo 65807  
  
First Contact Person: Dulsey Stewart  
Work Phone: (573) 239-0908 Fax: ( ) -  
Home Phone: ( ) - Cell Phone: ( ) -  
  
Second Contact Person: Laura Skiles  
Work Phone: (417) 849-4041 Fax: ( ) -  
Home Phone: ( ) - Cell Phone: ( ) -  
  
Promoter, if different from Organization: \_\_\_\_\_  
Promoter Contact: \_\_\_\_\_  
Promoter Phone: ( ) - Fax: ( ) -
4. Give a brief description of the event: fun run/walk fundraiser
5. Is this a first time event? NO if no, last year that event was held: 2015  
Please list any variations from the previous year:  
none
6. Festival Location: Park ☐ Street ☐ Park and Street ☒  
Name of Park and/or Street(s): FARMERS PARK - central location  
(run is on the street)
7. Event Type: (check all that apply)  
Carnival ☐ Concert ☐ Filming ☐ Parade ☐ Fireworks ☐ Run/Walk ☒  
Festival ☐ Sporting Event ☐  
Other ☐ (describe) \_\_\_\_\_
8. Festival Operation Schedule (specify day, date and times):  
Indicate S for set up, E for event day, T for tear down.  
(If more room is needed, list on a separate sheet of paper.)  
6am - Setup on Dec 3  
9am - race start  
9:15am - band starts  
10:30 - cleanup & finish
9. Estimated attendance per day: 250

10. Is this a charity event? Yes ☒ No ☐

If yes, please list name of organizations, contact name, phone number and address for each

Organization:

Organization	Contact Name	Address	Phone No.
The Summit Prep School	Laura Skiles	2155 W Chestnut Blvd	417-849-4041

11. Will this event be open to the public ☒ or by invitation only ☐

12. Will admission be charged? Yes ☐ No ☒ ← racers must pay

13. Will donations be taken? Yes ☒ No ☐

14. List all the streets you propose to close:

Street (indicate cross streets) Closing Date and Time Opening Date and Time

(i.e: Broadway (Chestnut Exp to Brower) Close 12/14/09 10:00 am; Open 12/16/09 9:00 pm)

NONE

(If more room is needed, list on a separate sheet of paper and attach to the application)

15. Will food be served ☒ and/or prepared ☐ at your event?

How many food vendors do you anticipate having NONE

How will food be prepared: LP gas grill ☐ Charcoal grill ☐ Electric grill ☐ prepackaged

16. Will alcoholic beverages be available at your event? Yes ☐ No ☒ post-race Snacks

If so, please answer all of the following:

- a) What type of alcoholic beverages will be available:

Beer ☐ Wine ☐ Spirituous Liquor ☐

- b) Will alcoholic beverages be sold by the drink ☐ or given away ☐

- c) Note what days, dates and times alcoholic beverages will be available:

17. Will there be any live entertainment or music at your event? Yes ☒ No ☐

If so, please answer all of the following:

- a) Will stages be built? Yes ☐ No ☒ If yes, how many \_\_\_\_\_

- b) What time will the performances take place each day:

Date

Start Time

Finish Time

Dec 3

9:15 am

10 am

18. Will additional electrical wiring be installed for your event? Yes ☐ No ☒

19. Will you be using generators ☒ and/or utility power ☒

20. Will tents be erected for your event? Yes ☐ No ☒ If so, how many \_\_\_\_\_

21. Will you require access to water? Yes ☐ No ☒

22. Will your event require restroom facilities? Yes ☒ No ☐

23. Have you arranged for security at your event? Yes ☐ No ☒

If so, who will be providing security: \_\_\_\_\_

24. Describe your plans for Emergency Medical Services: First aid station w/ nurse

25. Describe your plans for trash removal, as well as any organizations or persons directly involved with this aspect of the event: Farmers Park will remove trash

bins per their normal routines

*Additional City Permits/Licenses/Insurance Certificates may be required. Applicant is responsible to obtain all additional permits/licenses/insurance certificates required upon the issuance of this use permit.*

*Applicant must check and agree to abide by the following conditions to obtain this permit:*

☒ CLEAN UP - Applicant agrees to promptly clean up all paper or debris caused by applicant's use of the area and understands that if such clean up is not promptly undertaken the City reserves the right to do the cleaning itself and to charge the applicant for the actual time and expense incurred (bond or cash security may be required if attendance exceeds 1,000 persons).

☒ INSURANCE - Applicant agrees to provide a policy of liability insurance in the amount of \$1,000,000 per person, \$1,000,000 in the aggregate, naming the City of Springfield as an additional named insured, with appropriate endorsements as required by the City's Risk Management Administrator.

If liquor is provided or served on City property the event sponsor must provide liquor liability insurance in the amount of \$1,000,000 per occurrence, naming the City of Springfield as additional insured. All vendors, caterers, etc. hired by the event sponsor will also be required to carry liquor liability insurance in the amount of \$1,000,000. Event sponsor will provide copies of these certificates of insurance to the City. Liquor liability must clearly be stated on all certificates of insurance.

Certificates of insurance must be submitted with application.

☒ INDEMNITY - Applicant agrees to defend, indemnify and hold the City of Springfield harmless from and against all claims, losses, and liability arising out of personal injuries, including death, and damage to property which are caused by Applicant, or arising out of or in any way connected with the activities conducted pursuant to this application.

☒ CITY CODES/PERMITS - Applicant has received and read a copy of Section 36-485 of the City's Zoning Ordinance pertaining to Noise Standards. Applicant agrees to abide by all conditions as specified in the ordinance. Applicant also agrees to obtain all City permits and licenses that may be required, and shall comply with all other City laws and other conditions that the City Manager determines necessary.

☒ CONDUCT/NUISANCES - Applicant understands that if the outdoor activity is conducted in such a way as to create a nuisance for any business or resident of the area, future permits may be denied for that reason alone. Applicant will be notified as soon as practical that the activity engaged in created a nuisance and may ask for a review of such determination.

This application will not be processed unless a **site map** is included. Indicate location of tents, stages, portable rest rooms, fencing, food booths, alcoholic and non-alcoholic beverage booths, etc. Also indicate where streets will be blocked and how (fencing, barricades, stages, tents, etc.).

The Special Event Permit Coordinator in the Department of Public Information must be informed of any changes to the information provided in this document or to the site map.

Robert E. Gronniger  
Print Name  
417-869-8077  
Phone Number

Robert E. Gronniger  
Signature  
4/18/16  
Date

If you have any questions regarding an event or this application, please contact Sharon Spain, Special Event Permit Coordinator, at (417) 864-1105.